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SERIAL NUMBER 10/624,847	FILING OR 371(c) DATE 07/22/2003 RULE	CLASS 433	GROUP ART UNIT 3732	ATTORNEY DOCKET NO. BI9322CON
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APPLICANTS

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** CONTINUING DATA *****

This application is a CON of 09/991,533 11/15/2001 PAT 6,616,447 which claims benefit of 60/249,015 11/15/2000

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **
 12/01/2003

** SMALL ENTITY **

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 4	TOTAL CLAIMS 60	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

ADDRESS

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TITLE

Device for dental care and whitening

FILING FEE RECEIVED 2685	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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